U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 02016	2. Fiscal Year Covered From:			
	1 / 1 / 2005 Through: 12 / 31 / 2005			
3. Name and address of person filing.	Name, file number, and address of labor organization.			
Name William D Pollock +	Name Air Line Pilots Association, AAA MEC			
	Labor Organization File Number 069-073			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 333 Wheeler Road	Street 535 Herndon Parkway			
City East Montpelier	City Herndon			
Stale Vermont ZIP Code + 4 05651.	State Virginia ZIP Code + 4 20170-5226			
5. Position in labor organization. Master Executive Council Chairman				
	·			
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):				
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name US Airways Incorporated	This is the approximate value of a room and meals provided in association with my participation on			
Trade Name, if any: US Airways	the US Airways Board of Directors for a meeting held in Arlington, VA in April of 2005.			
P.O. Box, Bldg., Room No., if any				
	7.b. Amount.			
Street 2345 Crystal Drive				
City Arlington	\$250 \$200			
State Virginia ZIP Code + 4 22227	. 4 %			
Signature				
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
	ection on penalties in the instructions.)			
Signed	on 3/6/2006 412-719-6734			

Name of Person Filing William Pollock		File Number U- 02	016		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name This is the approximate value Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	9. Business deals with: a. Labor Organiza b. Trust c. Employer	ition	-		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ing.			
Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	11.b. Approximate dollar values and the second seco				
	12.b. Amount.		առով չ իւսուառու իսծաք ուժաժու ուժանունվանուն ժանուկանուն աժանու		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment. 14.b. Amount of payment.				
13.b. Is the Business an Employer or Consultant ?	. no. ranount or payment.				

Name of Person Filing William Polloc	File Number U- 02016

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived in employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose			
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.			
Name US Airways Incorporated	This is the approximate value of a room and meals provided in association with my participation on the US Airways Board of Directors for a meeting held in Prattsville, AL in October of 2005.			
Trade Name, if any: US Airways				
P.O. Box, Bldg., Room No., if any	7.b. Amount.			
Street 2345 Crystal Drive				
City Arlington	\$300			
State Virginia ZIP Code + 4 22227				
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose			
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street	7.b. Amount.			
City				
State ZIP Code + 4				
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	7 h. Amazanda			
Street	7.b. Amount.			
City				
State ZIP Code + 4				
Valuation and the control of the con				

Form LM-30 (2003)